

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052730

Entity Name: MED TECH INNOVATIONS, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

15981 HUFFMASTER RD.
NORTH FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT D. ROYSTON
PO DRAWER 60205
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 04-3762194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROYSTON, ROBERT D JR.
12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOODCHILD, WINTON J
Address: 67 WOLCOTT DRIVE, PO BOX 3427
City-St-Zip: NORTH FORT MYERS, FL 339183427

Title: STD () Delete
Name: GOODCHILD, SANDRA KAY
Address: PO BOX 3427
City-St-Zip: NORTH FORT MYERS, FL 339183427

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOODCHILD, WINTON J
Address: P.O. BOX 3427
City-St-Zip: NORTH FORT MYERS, FL 33918

Title: VP,T (X) Change () Addition
Name: CALLIS, WILLIAM A
Address: 318 N. E. 11TH ST.
City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM A. CALLIS

VP

04/21/2005

Electronic Signature of Signing Officer or Director

Date